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Editorial

Perspectives for IJS January 2012

At this time of Christmas cheer as I write this editorial, it would seem that the world is sliding deeper into economic gloom & doom together with rising tension in many parts of the globe. In this environment it is increasingly difficult to provide top quality surgical care for everyone. The centre of our efforts should & must always be our patients. If we are finding it difficult in the 1st world, we should remember how much more so it is for our colleagues struggling in under privileged countries.

There are a number of medical organizations who carry out wonderful deeds often in dangerous circumstances & at great cost; Medicine sans Frontiers, the Red Cross, Operation Hernia, the Mercy Ship & countless others, should receive all the help we can give them. We work in the “caring profession” & we must consider how best we can help our fellow man.

Vast sums in the western world are spent on so-called medical negligence. Obviously there are a small percentage of cases where patients need to be recompensed but I believe the majority of the claims are made due to poor consent, the inability to explain complications or even apologise afterwards if necessary. The money saved could be used to much greater benefit for the welfare of our patients.

Moving away from philosophy, what does this first edition in 2012 include? Following on from my comments on consent, the paper on the evaluation of the patient's understanding & recall of the consent process after open inguinal hernia repair is very pertinent. They demonstrate how poor recall of consent is & emphasize the need for reinforcement of the process. It is shown that recall is better for benefits compared to risks. We are all naturally optimists. In their study chronic pain, numbness & testicular problems were poorly addressed when consent was taken. I recall a small study we performed when I was an intern in which post operatively we asked patients to remember three facts-the name of the surgeon, the name of the operation & its date. We asked the patients to repeat these three facts at discharge; only 35% could answer all three questions correctly. In the clinic one month later that dropped to 14% & at six months to 6%. So it is not surprising that the recall to comments made taking consent is so poor. Proper informed consent could save anguish & much needed finances.

In this shorter than usual edition we have included two clinical & two research articles. On the clinical side there is the technical paper on Robot assisted laparoscopic liver resections from the unit of my friend & colleague, Michael Li in Honk Kong. They have demonstrated these operations are both feasible & safe. They had no conversions to open surgery, no mortality & few complications -2 bile leaks, managed non operatively. The second clinical paper concerns the use of the Lintula score with its 9 clinical variables, in the diagnosis of acute appendicitis in Turkish patients. The authors believe its use would reduce the incidence of normal appendices being removed.

The two research papers are interesting but we cannot be sure they will be applicable to humans. Once again one is technical from Taiwan on the use of a disposable electric non-fibre-optic endoscope in thoracoscopic surgery which would have huge commercial benefits if proved adaptable to humans as well as the advantage of decreased infection rates. The second research paper from Iran shows that amniotic fluid prevented intra-peritoneal adhesions after hysterectomy in rats. Its efficacy in long term lack of adhesion formation is yet to be studied, but it sounds very encouraging.

I have not been privy to my predecessor's article “back to the future”, but knowing Michael Baum as well as I do I feel certain within it there will be words of wisdom for all of us. I would like to congratulate Dr. Selwyn Rogers on being nominated reviewer of the month. We are so dependent on all our reviewers who give up precious time to aid us. A big thank you. Whilst thanking people I would like to add my gratitude to all at Elsevier for their magnificent contribution to our Journal which has risen in quality & popularity in such a short time. Thank you to all our Assistant Editors & the Editorial Board. Lastly my biggest thank you for his huge contribution & work ethic goes to Riaz Agha our Managing & Executive Editor.

May I wish you all a Happy, Healthy & Peaceful New Year.

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